

MISSIONS FEST ALBERTA 2019 February 22-24



CHILDREN'S REGISTRATION FOR AGES 3* - 5 & KINDERGARTEN – GR. 6 **Must be potty trained*

CHILD(REN) REGISTERING: Pre-Registration Closes on Tuesday, February 19th @ NOON

- 1) Last Name: _____ First Name: _____ Age _____ Grade _____ Sex ____
Medical Cond. (i.e.: Allergies): _____
- 2) Last Name: _____ First Name: _____ Age _____ Grade _____ Sex ____
Medical Cond. (i.e.: Allergies): _____
- 3) Last Name: _____ First Name: _____ Age _____ Grade _____ Sex ____
Medical Cond. (i.e.: Allergies): _____
- 4) Last Name: _____ First Name: _____ Age _____ Grade _____ Sex ____
Medical Cond. (i.e.: Allergies): _____
- 5) Last Name: _____ First Name: _____ Age _____ Grade _____ Sex ____
Medical Cond. (i.e.: Allergies): _____

PARENT/GUARDIAN REGISTERING CHILD(REN):

- 1) Last Name: _____ First Name: _____
Cell #: _____ (***must be available to contact***) Home #: _____
Address: _____ City: _____ Prov: _____ PC: _____
Email: _____ **Please email me pre-registration next year**

I authorize the Missions Fest Alberta Children's Team and Volunteers to care for my child(ren). In the event of any emergency wherein I am unable to be contacted, I authorize the Missions Fest Leadership to call 9-1-1. I authorize my child(ren) to use the materials that presenters may bring for use by my child(ren) and/or give to my child(ren), ex: craft supplies, scissors, balloons, etc.

_____ P/G Initials

Initials are equivalent to physically signing document.